

United States Environmental Protection Agency Washington DC 20460

is

This initial notification information is required by Section 103(c) of the Compre-hensive Environmental Response, Compen-paper, Indicate the letter of the item

Please type or print in ink: If you need

SFUND RECORDS CTR

	sation, and Liability Act of 1980 and must be mailed by June 9, 1981.		which a	pplies.				23905	<b>60</b>
	be mailed by June 9, 1961.		8	10609	A	25 0	60 001	035	
1	Person Required to Notify:			Madauala	Tno				
	Enter the name and address of the person or organization required to notify.		Name Motorola Inc.						
			Street 5005 E. McDowell Rd.						
			City	Phoenix			State AZ	Zip Code	85008
3	Site Location:		Name of Site Salt River Landfill Project						
	Enter the common name (if know actual location of the site.	Street Route #1, Box 216							
	AZD 980735781		Street	Kout	e #I, Box	216			·
			City SC	ottsdale	County	Maricor	a State AZ	Zip Code	95252
_	Person to Contact:							1	
•	Enter the name, title (if applicable), and business telephone number of the person		Name (Last, First and Title) Hild, Nick, Mgr, Chemical & Environmental Op.						
			Phone 602-244-4849						
	to contact regarding information submitted on this form.				002-244-	7075			
		,					•		
 )	Dates of Waste Handling:	-	-			,	•	,	
	Enter the years that you estimate waste			1076	•	1976			,
	treatment, storage, or disposal began and		From (Yea	From (Year) 1976 only To (Year) 1976					
	ended at the site.								
 E	Waste Type: Choose the option	on you pr	efer to c	omplete				,	
	Option I: Select general waste types and source cayou do not know the general waste types or source encouraged to describe the site in Item I—Description			purces, you are Resource Conservation and Recovery Act (RCRA) Section 3001					
	General Type of Waste: Place an X in the appropriate boxes. The categories listed overlap. Check each applicable category.	of Waste: X in the	appropriate	Specific Type of Waste: EPA has assigned a four-digit number to each hazardous wast listed in the regulations under Section 3001 of RCRA. Enter th appropriate four-digit number in the boxes provided. A copy of the list of hazardous wastes and codes can be obtained by contacting the EPA Region serving the State in which the site					
	1 D O	1. 🗆 Mi	nina		located.	•			
	<ol> <li>□ Organics</li> <li>□ Inorganics</li> </ol>		nstruction	n	D003	·		<u> </u>	
	3. □ Solvents	3. □ Te			D002				
	4. Pesticides	4. □ Fe			D004			1	
	5. ☐ Heavy metals	5. □ Pa	per/Print	ting	0004			1	
	6. □ Acids	6. □ Le	ather Tan	ากing				7	
	7. 🗆 Bases	7. 🗆 iro	n/Steel F	Foundry					
	8. □ PCBs	8. 🗆 Ch	nemical, G	3eneral					
	9.   Mixed Municipal Waste		ating/Poli						
	10. 🗆 Unknown			nmunition					
	11. ☑ Other (Specify)			onductors					
	BBr <sub>3</sub>	12. 🗆 Tr							
	P0C1	13. 🗆 Ut							
	Various lecture	14. 🗆 Sa	· ·				1.	1 JUN 198	1
	bottles of Antimony	15. D Ph					<b>-</b>		•
	Pentaflouride, Arsenic			aı					
	Trioxide, Boron	17. □ Ur		aifu)			6 6	110	
	Triflouride		ther (Spec ronic f	•				- 1 U	

EPA Form 8900-1

Form Approved OMB No. 2000-0138

<u>Cleaning</u>

	Notification of Hazardous Waste Sit	Side Two	Comment of the commen						
F	Waste Quantity:	Facility Type	tal Facility Waste Amount						
	*Place an X in the appropriate boxes to indicate the facility types found at the site.	Piles     Land Treatment	cubic feet 5 C						
	In the "total facility waste amount" space give the estimated combined quantity	3. XI Landfill 4.   Tanks	gallons Total Facility Area						
	(volume) of hazardous wastes at the site using cubic feet or gallons.	5. ☐ Impoundment	square feet						
	In the "total facility area" space, give the estimated area size which the facilities	6. ☐ Underground Injection 7. ☐ Drums, Above Ground	acres						
	occupy using square feet or acres.	8. ☐ Drums, Below Ground 9. ☐ Other (Specify)							
G	Known, Suspected or Likely Releases to the Environment:								
	Place an X in the appropriate boxes to indicate any known, suspected,  Or likely releases of wastes to the environment.								
	Note: Items Hand I are optional. Completing these items will assist EPA and State and local governments in locating and assessing hazardous waste sites. Although completing the items is not required, you are encouraged to do so.								
Н	Sketch Map of Site Location: (Optiona	1)							
	Sketch a map showing streets, highways, routes or other prominent landmarks near the site. Place an X on the map to indicate the site location. Draw an arrow showing the direction north. You may substitute a publishing map showing the site location.	ix TOPAY	SON						
		PAI							
	- TOPHOENIX								
	LANDFILL								
		TOMESA	CEMENTPLANT						
		OA -							
ī	Description of Site: (Optional)								
	Describe the history and present conditions of the site. Give directions to the site and describe any nearby wells, springs, lakes, or housing. Include such information as how waste was disposed and where the waste came from. Provide any other information or comments which may help describe the site conditions.	situated on the Indian ReState of Arizona. Primar landfill only.	nunity, Salt River Landfill is eservation in Maricopa County, ily used for municipal garbage						
			in a specially dug hole at a be disturbed by any of the						
		usual activities incurred	l with the operation of the						
		• •	vailable information indicates ed directly under high voltage						
			etween two support towers.						
J	Signature and Title:	Geno Ori, Vice Presider	nt & General Manager,						
	(Such as plant managers, supermenuents,	Name High Frequency & Optical Products Division  Owner, Present  Street 5005 E. McDowell Rd., Maildrop P020  □ Transporter							
	trustees or attorneys) of persons required to notify must sign the form and provide a								
	mailing address (if different than address in item A). For other persons providing	City Phoen ix State	Operator, Present						
	notification, the signature is optional.  Check the boxes which best describe the  relationship-to-the-site of-the-person————————————————————————————————————	Div Phoenix State AZ Zip Code 85008  Operator, Past							
	required to notify. If you are not required to notify check "Other".	Signature JM ( N	Date (6) (6)						